Practitioner's Docket No	PATENT
	S PATENT AND TRADEMARK OFFICE
- Tanast C	Confections
In re application of: Impact C Application No.: 09 /607,313 Filed: June 28, 2000	Examiner:
For Paint Set Confections	ery
☐ Patent*:	Issued:
'NOTE: Insert name(s) of inventor(s) and ti fee payment also insert application	tie also for patent. Where request is with respect to a maintenance n number and filing date and add Meil Stop 16 to address.
Mail Stop 16 Director of the U.S. Patent and Tr	ademark Office
P.O. Box 1450, Alexandria, VA 22313-1450	
REQU (IMPROPER CH	UEST FOR REFUND ARGE OF DEPOSIT ACCOUNT)
may be hand ca Avenue (Carlyle will only be ecc any correspond the receptionis Depending on related (e.g., a maintenance to writh REFUND,	its, deposit account replenishments, and maintenance fee payments mied to the Office of Finance receptionist in Suite 300, 2051 Jamieson Place building), Alexandria, VA 22314. Hand carried correspondence apted, and not processed. Although the receptionist will not process ence, if the correspondence is delivered with an iteratived postcard, it will provide a delivery receipt by date stamping the postcard, whether the correspondence is a refund request, deposit account deposit account replanishment, or maintenance fise related (e.g., a see payment), the correspondence should be placed in an envelope DEPOSIT ACCOUNT, or MAINTENANCE FEE written in dark inkelepe." See "Updated Lists of Exceptions to the Centralized Delivery Transmission Policy for Patent Related Correspondence," September
(When using Express Ma	UNDER 37 C.F.R. §§ 1.8(=) and 1.10* II, the Express Mail label number is mandatory; Mail certification is optional.)
I hereby certify that, on the date shown bet	ow, this correspondence is being: MAILING
deposited with the United States Postal Box 1450, Alexandria, VA 22313-1450	Service in an envelope addressed to Commissioner for Patents, P.O.
37 C.F.R. § 1.8(a)	37 C.F.R. § 1.10
with sufficient postage as first class ma	iii. as "Express Mail Post Office to Addressee" Mailing Label No
	TRANSMISSION
In faceimile transmitted to the Patent and	Trademark Office, (571) 273-6500
Date: 3/19/2007	Signature
Date:	774 d = 1 A Namana

* Only the date of filling (§ 1.6) will be the date used in a patent term edjustment calculation, elthough the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (\$ 1.8(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

(Request for Refund (unproper Charge of Credit (173,272000)) F12-04/11/2/2/2/2 134213

(Recuest for Refund (unproper Charge of Credit (173,272000)) F12-04/11/2/2/2/2 134213

Vidal A. Oaxaca.

(type or print name of person certifying)

09607313

19, 2005; 1299 OG 98, October 18, 2005, Exceptions for Certain Hand Carried Correspondence, item 12.

ij

NOTE (FACSIMILE): Refund requests fecsimile number 571-273-8500. See "Updated Lists of Exceptions to the Centralized Delivery and Facsimile Transmission Policy for Patent Related Correspondence," September 19, 2005; 1299 OG 98, October 18, 2005, Exceptions for Certain Factimile Transmitted Correspondence, Ilem 13.

NOTE: 37 C.F.R. § 1.26 Refunds.

(a) The Commissioner may refund any fee paid by mistake or in excess of that required. A change of purpose after the payment of a fee, such as when a party desires to withdraw a patent or trademark filing for which the fee was paid, including an application, an appeal, or a request for an oral hearing, will not entitle a party to a refund of such fee. The Office will not refund amounts of twenty-five dollars or less unless a refund is specifically requested, and will not notify the payor of such amounts. If a party paying a fee or requesting a refund does not provide the banking information necessary for making refunds by electronic funds transfer \$1 U.S.C. 3332 and 31 CFR part 208), or instruct the Office that refunds are to be credited to a deposit account, the Commissioner may require such information, or use the banking information on the payment instrument to make a refund. Any refund of a fee paid by credit card will be by a credit to the credit card account to which the fee was charged,

(b) Any request for refund must be filed within two years from the date the fee was paid, except as otherwise provided in this paragraph or in § 1.28(a). If the Office charges a deposit account by an amount other than an amount specifically indicated in an authorization (§ 1.25(b)), any request for refund based upon such charge must be filed within two years from the date of the deposit account statement indicating such charge, and include a copy of that deposit account statement. The time periods sat forth in this paragraph are not extendable.

REFUND REQUEST

This is 13-42	a request for a refund, with respect to the charge to Deposit Account 13, shown on the statement dated January, 2006, for the
above-ide	
	application.
	patent.
	(check the following, if desired, and supply copy of statement)
23	A copy of the monthly statement, in which the error referred to occurs accompanies this request.

(Request for Refund (Improper Charge of Credit Card Account) [19-4]—page 2 of 4)

II. FEES CHARGED FOR WHICH REFUND REQUESTED

	,		AMOUNT OF REFUND REQUESTED
	Basic f	98	
	Examin	ation fee .	\$
	Search	•	\$
	Additio	nal fee for specification and drawings	\$
	than th	irge for filing the basic filing fee on a date late ne filing date of the application F.R. § 1.16(e))	r
	-	and/or	
	later ti	arge for filing the oath or declaration on a date han the filing date of the application F.R. § 1.16(e))	
(3)	Extens	sion of term	
		first month	A100
	図	second month	\$120
		third month	
		fourth month	
		fifth month	
	Exces	ss claims	
	Issue	fea	
	Petitio	on fee	
	Pater	nt maintenance fee	`
		first maintenance fee	
		second maintenance fee	
		third maintenance fee	
) Pater	nt maintenance fee surcharge	
	Othe	T	
		TOTAL REFUND REQUESTED	\$120

(Request for Refund (Improper Charge of Credit Card Account) [19-4]—page 3 of 4)

III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

On January 9, 2006, we filed an Amendment and Response but failed to include a Petition for a Two-Month Extension of Time to Respond (response was due December 7, 2005). Our deposit account was automatically charged \$120 (erroneously charged as a large entity) as shown on the attached deposit account statement. Our client claimed small entity status (see Statement Claiming Small Entity Status attached dated June 20, 2000 that was filed with the initial application).

Then on January 11, 2006, we faxed a Petition for a Two-Month Extension of Time to Respond acknowledging that it had been omitted from the January 9, 2006 filing (copy of Petition is attached). Our deposit account was then correctly charged \$225.

We acknowledge the \$225 charge and respectfully request that our account be refunded \$120 for the initial charge.

IV. MANNER OF REFUND

Please	make the refund by	
X	Crediting Deposit Account No13	3-4213
	Crediting applicant's credit card as s tion form PTO-2038.	hown on the attached credit card authoriza-
WARNING	credit card information should not be inclu	uded on this form as it may become public.
	Sending refund check to applicant	:
	By electronic funds transfer using	the banking information on the payment
	Instrument	Valoria de la companya della company
		SIGNATURE OF PRACTITIONER
Reg. No.	44,267	Vidal A. Oaxaca
_	***,**	(type or print name of practitionar)
Tel. No.:	(505) 998-1500	P. 0. Box 26927
Custome	r No.: 5179	Albuquerque, NM 87125-6927
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(Request for Refund (Improper Charge of Credit Card Account) [19-4] page 4 of 4)

. 03/19/Q7 -12:52 FAX 505 243 2542

PEACOCK LAW FIRM

Practitioner's Docket No. 31 /-US

PATENT

IN THE UNITED ST	ATES PATENT AND TRADEMARK OFFIC	
Applicants BRAD BAKER	□ Palentèe	
a Application No.	□ PatentiNo	
D Filed on	o Issued on	
Title: PAINT SET CONFECTIONERY	·	
	T CLAIMING SMALL ENTITY STATUS Id 1.27(c)) - SMALL BUSINESS CONCERN	
hereby state that I am	an concern identified below:	
the owner of the small busines an official of the small busine	ss concern rempowered to act on behalf of the	e concern identified
below:		
Name of Small Business Concern	IMPACT CONFECTIONS, INC.	
Address of Small Business Concern	888 Garden of the Gods Road	
·	Colorado Springs, Colorado 80907	•
defined in 13 CFR 121.12, and reproduct United States Patent and Trademark C in that the number of employees of the persons. For purposes of this statement average over the previous fiscal year of temporary basis during each of the particle of the partic	at as law have been conveyed to, and remain	United States Code, as not exceed 500 ness concern is the full-time, part-time or are affiliates of each ontrol the other, or a
business concern identified above, with	(i) regard to the inventor constraint	
s the specification filed herew		
the application identified ab		
the patent Identified above.		

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights in the invention is listed below and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c), if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

*NOTE: Separate statements are required from each named person, concern or organization having rights to the invention as to their status as small entities. (31 CFR 1.27)

Practitioner's Docket No. 3. .7-US

PATENT

Each such person, concern or organization having any rights in the invention is listed below: ■ No such person, concern, or organization exists. □ Each such person, concern or organization is listed below. Name Address o small business concern o nonprofit organization o INDIVIDUAL Name □ NONPROFIT ORGANIZATION SMALL BUSINESS CONCERN D INDIVIDUAL I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small business entity is no longer appropriate. (37 CFR 1,28(b)) (check the following item, if desired) NOTE: The following verification statement need not be made in accordance with the rules published on Oct. 10, 1997, 62 Fed. Reg. 52,131, effective Dec. 1, 1997. NOTE: "The presentation to the Office (whether by signing, filing, submitting, or later advocating) of any paper by a party, whether a practitioner or non-practitioner, constitutes a certification under § 10.18(b) of this chapter. Violations of § 10.18(b)(2) of this a practitioner of non-practitioner or non-practitioner, may result in the imposition of senctions under § 10.18(c) of this chapter by a party, whether a practitioner or non-practitioner, may result in the imposition of senctions under § 10.18(c) of this chapter. Any practitioner violating § 10.18(b) may also be subject to disciplinary action. See §§ 10.18(d) and 10.23(c)(15)." 37 CFR § 1.4(d)(2). I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed. Name of Person Signing ______ Brad Baker Title of Person if Other Than Owner President 888 Garden of the Gods Road Address of Person Signing ____ Colorado Springs, CO 80907 Date: 6-20-00

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Deposit Account Statement

https://ramps.uspto.gov/cram/Controller;jsessionid=0000nRhPdk...





Deposit Account Statement

Requested Statement Month: Deposit Account Number:

Name:

Attention:

Address:

City:

State:

Zip:

Country:

January 2006

134213

PEACOCK MYERS, P.C. DEBORAH A. PEACOCK

P. O. BOX 26927

ALBUQUERQUE

NM

87125-6927

UNITED STATES

DATE SEQ POSTING	ATTORNEY DOCKET NBR	CODE	AMT,	BAL
	30817-1009	7001	\$325.00	\$2,718.09
01/03 383 78783223 01/03 390 78783229	30817-1001	7001	\$325.00	\$2,393.09
*	31886-1001	7003	\$100.00	\$2,293.09
•	31880-1001	7001	\$325.00	\$1,968.09
Q1104 -174	31880-1001	7001	\$325.00	\$1,643.09
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01/12 345 17145745	30687-US	1251	\$120.00	
01/12 3 09607313	30687-US	2202	\$50.00	\$3,438.09
01/12 4 09607313	30687-US	2201	\$100.00	
01/13 824 78431042	32064-001-2	7004	\$1,50.00	
01/13 64 09607313	30687-US	2252	\$225.00	
01/17 23 60669748	31508-14	8007	\$20.00	\$2,943.09
01/17 24 60635847	31508-13	8007	\$20.00	\$2,923.09
01/17 369 78791494	31883-1001	7001	\$325.00	
01/18 950 76341384	31548-1001	7003	\$500.0	\$2,098.09

P.O. Box 26927

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3 Admitted New Mexico Bar

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5Admitted Texas and Washington Bars

*Admitted Michigan Bar

Registered Agent, U.S. Patent and Trademark Office (non-attorney)

FAX COVER SHEET

March 19, 2007

10:

US PTO

FIRM:

DOCUMENT: Request for Refund

PAGES (including cover sheet): 8

FROM:

Beth Tyree

FAX NO.:

1-571-273-6500

MESSAGE

Please find attached a Request for Refund Form with supporting documentation for SN 09/607,313

Original will not follow Original will follow via:		CLIENT # 7110 MATTER # 1001
 First-class mail	Courier	•

Please telephone Carin or Rick at (505) 998-1500 if you do not receive or cannot clearly read the information transmitted herewith. Our return fax number is (505) 243-2542. This message is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, note that any dissemination, distribution or copying of this communication is prohibited. If you have received this communication in error, please notify us immediately by telephone, and return the original message to us at the above address. Thank you.

saction List earch by Accounting D Name/Numb Attrny Docke	(MMDDY er: 096 t No:		rator ID:			Accountin Starts:	ng Date Ends:	Find
Deposit Accounting Date	Operator ID	Seq.	Txn Src	Fee Code	St	Amount	Name/Number	Dep Acc
07/24/2006	INTEFSW	902	SALE	2251	A	60.00		10.1010
01/13/2006	EFLORES	64	SALE	2252	A	225.00		134213
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10/07/2002	AWONDAF1	134	SALE	2401	Ä	130.00		
10/07/2002	AWONDAF1	133	SALE	2401	Ä	30.00		134213
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